

JTW



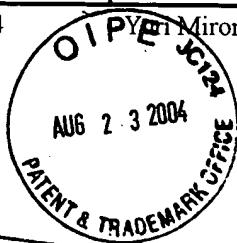
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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/820,544	04/08/2004	Yuri Mironovich Volkovich	24540-74222US

27730  
DILWORTH PAXSON LLP  
3200 MELLON BANK CENTER  
1735 MARKET STREET  
PHILADELPHIA, PA 19103



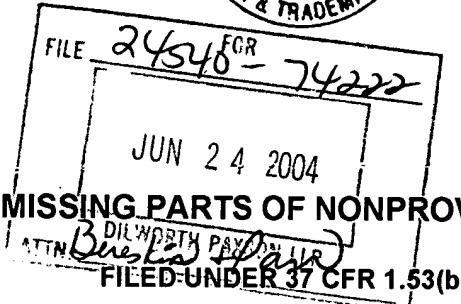
CONFIRMATION NO. 8373  
FORMALITIES LETTER



\*OC000000013020343\*

Date Mailed: 06/22/2004

**NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION**



***Filing Date Granted***

**Items Required To Avoid Abandonment:**

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.  
*A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.

**SUMMARY OF FEES DUE:**

Total additional fee(s) required for this application is **\$65** for a Small Entity

- **\$65** Late oath or declaration Surcharge.

Replies should be mailed to: Mail Stop Missing Parts  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

*A copy of this notice **MUST** be returned with the reply.*

*Oro*  
Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



Please place a plus sign (+) inside this box →

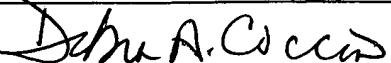
AUG 23 2004

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

<b>TRANSMITTAL FORM</b>		<b>Application Number</b>	10/820,544
(to be used for all correspondence after initial filing)		<b>Filing Date</b>	04/08/2004
		<b>First Named Inventor</b>	Y. VOLFKOVICH, et al.
		<b>Group Art Unit</b>	1745
		<b>Examiner Name</b>	TBA
Total Number of Pages in This Submission		<b>Attorney Docket Number</b>	24540-74222US

<b>ENCLOSURES (check all that apply)</b>			
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Informal Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i>  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> Response to Notice of Informal Application; four (4) executed Declarations; Return Postcard.	
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>			
Firm or Individual Name	Darryl W. Shorter, Reg. No. 47,942		
Signature			
Date	August 23, 2004		

<b>CERTIFICATE OF EXPRESS MAILING</b>		
I hereby certify that this correspondence is being deposited with the United States Postal Service with Express Mail Label No. EV222872787US in an envelope addressed to: Mail Stop MISSING PARTS, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313 on this date: August 23, 2004.		
Typed or printed name	Debra A. Coccia	
Signature		Date: August 23, 2004
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# FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$65.00)****METHOD OF PAYMENT (check all that apply)** Check    Credit Card    Money Order    Other    None Deposit Account:Deposit Account Number **50-0979**Deposit Account Name **Dilworth Paxson LLP**

The Commissioner is authorized to: (check all that apply)

 Charge fee(s) indicated below    Credit any overpayments Charge any additional fee required under 37 CFR 1.16 and 1.17 Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

#### Large Entity      Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	\$
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
<b>SUBTOTAL (1)</b>				\$	

### 2. EXTRA CLAIMS FEES FOR UTILITY AND REISSUE

				Fee from below	Fee Paid
				Extra Claims	
Total Claims	*	**	=	0 X *	= \$ 0
Independent Claims	*	**	=	0 X *	= \$ 0
Multiple Independent				+ 290/145=	\$

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2)</b>				\$ 0

\*\*or number previously paid, if greater; For Reissue, see above

**SUBMITTED BY CUSTOMER NO. 27730**

Complete (if applicable)

Name (Print/Type)	Darryl W. Shorter	Registration No. (Attorney/Agent)	47,942	Telephone	(215) 575-7000
Signature				Date	August 23, 2004